| PART B - FEE(S) TRANSMITTAL   |   |  |   |  |   |                               |   |
|---|---|--|---|--|---|-------------------------------|---|
| omplete and send  | this form, together w   | m applicable   | fee(s), to: I   | <u>Mail</u>  | Mail Stop ISSU  | FEE                           | Z   |
| 03  |   |  | -16-0   | 6  | Commissioner for P.O. Box 1450 Alexandria, Virg   | or Patents                    | <i>A</i>  |
| (_MAR 1 4 2006)   |   |  | or  | <u>Fax</u>   | (571)-273-2885  |                               |   |
| NATRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed when appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address a indicate property of the correspondence address and notification of maintenance fees will be mailed to the current correspondence address a indicate property of the correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address. |   |  |   |  |   |                               |   |
| CURRENT CORRESPONDENCE  |   |  |   | Note: A certificate of Fee(s) Transmittal. The papers. Each addition | mailing can only be used<br>his certificate cannot be use<br>al naner, such as an assign  | for domestic mailings of the  |   |
| 22442 7590 02/17/2006   |   |  |   |  |   | e of mailing or transmission  |   |
| SHERIDAN ROSS PC<br>1560 BROADWAY<br>SUITE 1200<br>DENVER, CO 80202   |   |  |   |  | Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. |                               |   |
| DENVER, CO 80202<br>03/17/2006 MBELETE2 00000126 10054150   |   |  |   |  | Claudia A. Mendoza (Depositor's name)   |                               |   |
| 01 FC:1501  | 1400.00 OP  |  |   |  | March 14,   | Co 1006                       | (Signature)   |
| 02 FC:8001  | 30.00 DP  |  |   |  | Liaren 14,  | 2000                          | (Date)  |
| APPLICATION NO.   | FILING DATE   | FIRST NAMED INVE   |   |  | TOR   | ATTORNEY DOCKET NO.           | . CONFIRMATION NO.  |
| 10/054,150  | Robert J. Smith   |  |   | 1604-316-CIP   | 6180  |                               |   |
| TITLE OF INVENTION: P.  | ROCESSING OF MULTIPE  | E WAVELENGT  | H SIGNALS T   | RANS   | MITTED THROUGH  | FREE SPACE                    |   |
| APPLN. TYPE   | SMALL ENTITY  | ISSUE FEE  |   | PU   | JBLICATION FEE  | TOTAL FEE(S) DUE              | DATE DUE  |
| nonprovisional  | NO  | \$1400   |   |  | \$0   | \$1400<br>-                   | 05/17/2006  |
| EXAMINER  |   | ART UNIT   |   | CI   | LASS-SUBCLASS   | ]                             | ٠   |
| BELLO, AGUSTIN 26   |   |  | ·   |  | 359-172000  |                               |   |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  (1) the names of up to 3 registered patent attorneys  1 Sheridan Ross P.C.  |   |  |   |  |   |                               |   |
| Change of correspond Address form PTO/SB/12   | Correspondence  | or agents OR, alternatively,   |   |  |   |                               |   |
| "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required.  | ation form<br>e of a Customer                                   | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |   |  |   |                               |   |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)   |   |  |   |  |   |                               |   |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.   |   |  |   |  |   |                               |   |
| (A) NAME OF ASSIGN<br>BALL AEROSPA(   |   | (B) RESIDENCE: (CITY and STATE OR COUNTRY) 1600 Commerce Street, Boulder, CO 80301   |   |  |   |                               |   |
| Please check the appropriate  | assignee category or catego                                     | ries (will not be pr   | inted on the pa   | itent):  | ☐ Individual 💆 C  | orporation or other private   | group entity Government                                       |
| 4a. The following fee(s) are  | 41  | 4b. Payment of Fee(s):   |   |  |   |                               |   |
| Issue Fee Publication Fee (No small entity discount permitted)  |   |  | A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  |  |   |                               |   |
| Advance Order - # of Copies10   |   |  | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). |  |   |                               |   |
| 5. Change in Entity Status  a. Applicant claims Si  | ☐ h Annlice   | b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).   |   |  |   |                               |   |
|   |   |  |   |  |   |                               |   |
| interest as shown by the reco   | ubucation Fee (if required) v<br>ords of the United States Pate | vill not be accepted<br>int and Trademark  | office.   | other ti   | han the applicant; a reg  | istered attorney or agent; or | ication identified above.<br>r the assignee or other party in |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Date

Registration No.

March 14, 2006

44,189

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Authorized Signature

Typed or printed name

Bradley M. Knepper